Public Service Commission of Wisconsin RECEIVED: 06/02/10, 10:24:15 AM

PUBLIC SERVICE COMMISSION OF WISCONSIN

Appearance Slip

(please print clearly)

Docket Number and Title Application to Increase Water Rates 3560	9-WR-106		Hearing Date June 2, 2010
Name MELAMIE KRAVSE		Title MGR	OF BUSINESS OPS
Street, Rural Route Number, or P.O. Box Number POPOL 340 , 521 M(WAVEE STREET)			
City' MENAGHA		State WI	Zip Code り495み
Telephone Number 220-9101-3417 E-Mail Address MYRWSCO WITHURY 94. 076			
Representing Self Employer MENASHA VTUTES Organization			
Do you wish to testify? Yes No Undecided	Would you like to rece Yes ☐ No	rive a copy of t	he Commission's decision?
Appearance AS INTEREST MAY APPEAR	☐ IN SUPPOR	Т	☐ IN OPPOSITION
Signature Maul			

If you would like to provide written comments instead of oral testimony, please use the remainder of this sheet and other pages, if necessary, for your written comments. The admission of written comments into the hearing record is subject to parties' objections. Your signature above affirms that your written comments are true and correct to the best of your knowledge and belief.